

## UNITED STATES COURT OF APPEALS

## DISTRICT OF COLUMBIA CIRCUIT

333 Constitution Avenue, NW  
 Washington, DC 20001-2866  
 Phone: 202-216-7000 | Facsimile: 202-219-8530

## AGENCY DOCKETING STATEMENT

*Administrative Agency Review Proceedings (To be completed by appellant/petitioner)*

1. CASE NO. 18-1300, -1322 2. DATE DOCKETED: 11-05-2018
3. CASE NAME (lead parties only) \_\_\_\_\_ v. National Labor Relations Board
4. TYPE OF CASE: ☒ Review ☐ Appeal ☐ Enforcement ☐ Complaint ☐ Tax Court
5. IS THIS CASE REQUIRED BY STATUTE TO BE EXPEDITED? ☐ Yes ☒ No  
 If YES, cite statute \_\_\_\_\_
6. CASE INFORMATION:
  - a. Identify agency whose order is to be reviewed: National Labor Relations Board
  - b. Give agency docket or order number(s): 366 NLRB No. 131 (2018) (09-CA-116410)
  - c. Give date(s) of order(s): July 24, 2018
  - d. Has a request for rehearing or reconsideration been filed at the agency? ☒ Yes ☐ No  
 If so, when was it filled? 08-28-2018 By whom? Petitioner  
 Has the agency acted? ☒ Yes ☐ No If so, when? 10-17-2018
  - e. Identify the basis of appellant's/petitioner's claim of standing. See D.C. Cir. Rule 15(c)(2):  
Section 10(f) of the National Labor Relations Act provides that any person aggrieved by a final  
order of the National Labor Relations Board may obtain review by this Court.
  - f. Are any other cases involving the same underlying agency order pending in this Court or any other?  
☐ Yes ☒ No If YES, identify case name(s), docket number(s), and court(s)  
 \_\_\_\_\_
  - g. Are any other cases, to counsel's knowledge, pending before the agency, this Court, another Circuit Court, or the Supreme Court which involve *substantially the same issues* as the instant case presents?  
☐ Yes ☒ No If YES, give case name(s) and number(s) of these cases and identify court/agency:  
 \_\_\_\_\_
  - h. Have the parties attempted to resolve the issues in this case through arbitration, mediation, or any other alternative for dispute resolution? ☐ Yes ☒ No If YES, provide program name and participation dates.  
 \_\_\_\_\_

Signature /s/ David R. Broderdorf Date 12-07-2018

Name of Counsel for Appellant/Petitioner David R. Broderdorf

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## ATTACH A CERTIFICATE OF SERVICE

**Note:** If counsel for any other party believes that the information submitted is inaccurate or incomplete, counsel may so advise the Clerk within 7 calendar days by letter, with copies to all other parties, specifically referring to the challenged statement.

**CERTIFICATE OF SERVICE**

I hereby certify that on December 7, 2018, I electronically served and filed the foregoing Agency Docketing Statement with the Clerk of the Court by using the appellate CM/ECF system. I also hereby certify that the following participants in the case are registered CM/ECF users and will be served via the CM/ECF system:

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*Counsel for Respondent/Cross Petitioner*

Dated: December 7, 2018

/s/ David R. Broderdorf

David R. Broderdorf

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